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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name	Darche	
	First name	First name
Write the name that is on your government-issued		
picture identification (for	Middle name	Middle name
example, your driver's license or passport	Turner	
licerise of passport	Last name	Last name
Bring your picture	Coeffice (Com. In 11 111)	Conffice (Conclusion IIIII)
identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2 All other names you		
2. All other names you have used in the last	First name	First name
8 years		
-	Middle name	Middle name
Include your married or maiden names.		
	Last name	Last name
	Edward	<del></del>
	First name	First name
	Middle name	Middle name
	Wilderfatte	WIRGITE
	Last name	Last name
3. Only the last 4 digits	XXX - XX- 7813	VVV - VV-
of your Social Security number or		XXX - XX-
federal Individual	OR	OR
Taxpayer Identification number	9 xx - xx-	9 xx - xx-
(ITIN)		

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D	ebtor 1 Darche First Name	Turner  Middle Name Last Name	Case number (if known)
	i ii st ivaine	Wilder Valle Last Ivalle	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the last		Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		7210 S Champlain  Number Street	Number Street
		Chicago Illinois 60619	
		City State Zip Code Cook	City State Zip Code
		County	County
		If your mailing address is different from the one	If Debtor 2's mailing address is different from yours,
		above, fill it in here. Note that the court will send any	fill it in here. Note that the court will send any notices to
		notices to you at this mailing address.	this mailing address.
		Number Street	Number Street
		City State Zip Code	City State Zip Code
_		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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De	ebtor 1 Darche		Turner	_ Case number (if kn	own)
	First Name	Middle Name	Last Name		
Pa	Tell the Court Abo	ut Your Bankruptcy Ca	ase		
7.	The chapter of the Bankruptcy Code you are choosing to file under		description of each, see <i>Notice F</i> O)). Also, go to the top of page 1 a		C. § 342(b) for Individuals Filing for opriate box.
8.	How you will pay the fee	more details about I cashier's check, or may pay with a cred  I need to pay the feal Individuals to Pay 1  I request that my feal in the official poverty I you choose this option	how you may pay. Typically, it money order. If your attorney dit card or check with a pre-prise in installments. If you choover filing Fee in Installments ee be waived (You may request required to, waive your fee, line that applies to your family	you are paying the submitting your nted address.  see this option, signormal of the set this option only and may do so on a size and you are	the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney on and attach the <i>Application for</i> BA).  If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
9.	Have you filed for bankruptcy within the last 8 years?	✓ No.  Yes. District  District  District		MM / DD / YYYY en MM / DD / YYYY	Case number  Case number  Case number
10	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No.  Yes. Debtor  District  Debtor  District	<u>w</u> r	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11.	Do you rent your residence?	✓ No. Go to			st You (Form 101A) and file it with

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Debtor 1 Darche Turner Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Darche Turner Case number (if known)

First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for

waiver of credit counseling with the court.

waiver of credit counseling with the court.

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Debtor 1 Darche		Turner Case num	Der (if known)
Part 6: Answer These Que	Middle Name  estions for Reporting Purposes	Last Name	
16. What kind of debts do you have?	16a. Are your debts primarily "incurred by an individual  No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily money for a business or in  No. Go to line 16c.  Yes. Go to line 17.	consumer debts? Consumer de la primarily for a personal, family, of business debts? Business debts?	s are debts that you incurred to obtain ion of the business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that for No.		cempt property is excluded and administrative ounsecured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 mi \$100,000,001-\$500 million	ion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 millio \$10,000,001-\$50 millio \$50,000,001-\$100 mi \$100,000,001-\$500 m	ion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
Part 7: Sign Below  For you	correct.  If I have chosen to file under Chof title 11, United States Code. under Chapter 7.  If no attorney represents me and out this document, I have obtain I request relief in accordance will understand making a false state.	napter 7, I am aware that I may pro- I understand the relief available of d I did not pay or agree to pay so ned and read the notice required ith the chapter of title 11, United tement, concealing property, or co case can result in fines up to \$250 1519, and 3571.	ury that the information provided is true and occeed, if eligible, under Chapter 7, 11,12, or 1 under each chapter, and I choose to proceed omeone who is not an attorney to help me fill by 11 U.S.C. § 342(b).  States Code, specified in this petition. obtaining money or property by fraud in 0,000, or imprisonment for up to 20 years, or gnature of Debtor 2
	Executed on 3/27/2018		xecuted on

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Debtor 1 Darche		Turner	Case number	(if known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one  If you are not	eligibility to proceed und relief available under each	er Chapter 7, 11, 12, or n chapter for which the	13 of title 11, Unit person is eligible. I	have informed the debtor(s) about sed States Code, and have explained the lalso certify that I have delivered to the
•	• ,		• •	which § 707(b)(4)(D) applies, certify that I
represented by an attorney, you do not	nave no knowledge after	an inquiry that the infor	mation in the sche	edules filed with the petition is incorrect.
need to file this page.	/s/ Stephen Cramaro Signature of Attorney for		Date	3/27/2018 MM / DD / YYYY
	Stephen Cramarosso Printed name			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Aver	nue		
	Street			
	Chicago	II	linois	60643
	City	S	tate	Zip Code
	Contact phone		Email address	scramarosso@semradlaw.com
	Bar number		State	<u> </u>

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Fill in this infor	mation to identify your ca	ase:	
Debtor 1	Darche		Turner
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
		_	(State)
Case number (If known)			

Check if this is an
amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$10,000.00
1b. Copy line 62, Total personal property, from Schedule A/B	
1c. Copy line 63, Total of all property on Schedule A/B	\$10,000.00
art 2: Summarize Your Liabilities	
	<b>Your liabilities</b> Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$12,737.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	<b>***</b>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$65,472.00
Your total liabilities	\$78,209.00
Part 3: Summarize Your Income and Expenses	
. Schedule I: Your Income (Official Form 106I)	\$2,737.71
Copy your combined monthly income from line 12 of Schedule I	<del></del>
. Schedule J: Your Expenses (Official Form 106J)	\$2,730.00

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Debt	tor 1 Darche		Turner	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 4	4: Answer These Question	ns for Administrat	ive and Statistical Records	<u> </u>	
6. <b>A</b> r	re you filing for bankruptcy un	der Chapters 7, 11, o	r 13?		
	No. You have nothing to repo	rt on this part of the fo	rm. Check this box and submit the	his form to the court with your other se	chedules.
<u>-</u>	Yes.				
7. <b>W</b>	hat kind of debt do you have?				
·			mer debts are those incurred by	an individual primarily for a personal,	
_		,	·	part of the form. Check this box and s	u hmit
L	this form to the court with you		of flave flottling to report off tins	part of the form. Check this box and s	SUDITIL
	From the Statement of Your Co Form 122A-1 Line 11; <b>OR</b> , Form		e: Copy your total current monthorm 122C-1 Line 14.	ly income from Official	\$3,243.67
9.	Copy the following special ca	tegories of claims fro	m Part 4, line 6 of Schedule E	/F:	
	From Part 4 on Schedule E/F,	copy the following:		Total claim	
	9a. Domestic support obligation	s (Copy line 6a.)		\$0.00	
	9b. Taxes and certain other deb	s you owe the governr	ment. (Copy line 6b.)	\$0.00	
	9c. Claims for death or personal	injury while you were i	ntoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy line 6f	)		\$24,238.00	
	9e. Obligations arising out of a spriority claims. (Copy line 6g.)	eparation agreement o	r divorce that you did not report	sas \$0.00	
	9f. Debts to pension or profit-sh	aring plans, and other	similar debts. (Copy line 6h.)	\$0.00	

\$24,238.00

9g. **Total.** Add lines 9a through 9f.

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Fill in this	information	n to identify your c	ase:						
Debtor 1	Darc				Turner				
Debtor 2	First	Name	Middle N	ame	Last Name				
(Spouse, if fi	ling) First	Name	Middle N	ame	Last Name	_			
United Sta	ates Bankru	ptcy Court for the:	Northern		District of Illinois				
Case num	nber				(State)	_			
Officia	al Form	106A/B							Check if this is an amended filing
Sche	dule A	/B: Prope	erty						12/1
category v responsib write your	where you le for suppl name and	think it fits best. I ying correct infor case number (if I	Be as complete a mation. If more s known). Answer e	nd ac pace very o	asset only once. If an asset fits curate as possible. If two marr is needed, attach a separate s question. r Other Real Estate You Ow	ed peop heet to	ole are this fo	e filing together, both a rm. On the top of any a	are equally
			quitable interest i	n any	residence, building, land, or s	milar pı	ropert	y?	
	No. Go to								
1.1		e is the property?	other description		at is the property? Check all that Single-family home Duplex or multi-unit building	apply.		the amount of any secu	claims or exemptions. Put tred claims on Schedule D: aims Secured by Property.
					Condominium or cooperative  Manufactured or mobile home			Current value of the entire property?	Current value of the portion you own?
	Number	Street State	Zip Code	Ħ	Land Investment property Timeshare Other	_		Describe the nature of interest (such as fee sthe entireties, or a life	simple, tenancy by
				one.	b has an interest in the property  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an		k	Check if this is co (see instructions)	ommunity property
				ш	er information you wish to add		his ite	m, such as local	
16			lak la awa	pro	perty identification number:				
1.2		re more than one, li			at is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	apply.		the amount of any secu	claims or exemptions. Put tred claims on <i>Schedule D:</i> <i>iims Secured by Property.</i> Current value of the portion you own?
				ш	Land				
	Number	Street	7in Code	H	Investment property Timeshare			Describe the nature of interest (such as fee sthe entireties, or a life	simple, tenancy by
	City	State	Zip Code	Who one.	Other  has an interest in the property  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and an  er information you wish to add  perty identification number:	other		(see instructions)	emmunity property

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Debtor 1	Darche First Name	Middle Name	Turner Last Name	Case number	(if known)	
1.3 Stre	eet address, if available, or o		What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	t apply.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
Nu	mber Street y State	Zip Code	Land Investment property Timeshare Other		Describe the nature or interest (such as fee s the entireties, or a life	imple, tenancy by
			Who has an interest in the propert  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar  Other information you wish to add property identification number:	nother	Check if this is co (see instructions)  such as local	mmunity property
	I the dollar value of the po ave attached for Part 1. W	rite that number h	<b>.</b>	luding any entries	s for pages	
Do you o		equitable interes	t in any vehicles, whether they are also report it on Schedule G: Executo	-	-	
3. Cars, v		tility vehicles, motor	rcycles			
3.1	Model: Year:	Honda Accord 2009	Who has an interest in the proone.  Debtor 1 only	operty? Check	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> nims Secured by Property.
	Approximate mileage: Other information: 2009 Honda Accord	80000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is community		Current value of the entire property? \$7425.00	Current value of the portion you own? \$7425.00
3.2	Make Model: Year:		Who has an interest in the proone.  Debtor 1 only	operty? Check		claims or exemptions. Put ured claims on Schedule D:
	Approximate mileage:		Debtor 2 only		Current value of the	aims Secured by Property.

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btor 1	Darche		Turner	Case numbe	er (it known)	
	First Name	Middle Name	Last Name			
3.3	Make Model: Year:		Who has an interest in the pro	pperty? Check	the amount of any secu	claims or exemptions. Pured claims on <i>Schedule</i> aims <i>Secured by Property</i>
	Approximate mileage:		Debtor 1 only		oroditoro virio riavo ola	anno cocarca by rroporty
	Approximate mileage.		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?
			At least one of the debtors ar	nd another	·	-
			Check if this is community instructions)	property (see		
3.4	Make		Who has an interest in the pro	perty? Check		claims or exemptions. Pu
	Model:		one.			red claims on Schedule
	Year:		Debtor 1 only		Creditors Who Have Cla	aims Secured by Property
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?
			At least one of the debtors ar	nd another	·	
			Check if this is community instructions)	property (see		
Exar	mples: Boats, trailers, motors		ner recreational vehicles, other ve ft, fishing vessels, snowmobiles, mot			
Exar	nples: Boats, trailers, motors No Yes		ner recreational vehicles, other ve	torcycle accessori	Do not deduct secured the amount of any secu	claims or exemptions. Pured claims on <i>Schedule</i>
Exar	nples: Boats, trailers, motors No Yes Make Model: Year:		ner recreational vehicles, other ve ft, fishing vessels, snowmobiles, mot Who has an interest in the pro	torcycle accessori	Do not deduct secured the amount of any secu	•
Exar	nples: Boats, trailers, motors No Yes Make Model:		who has an interest in the pro	torcycle accessori	Do not deduct secured the amount of any secu	red claims on <i>Schedule</i> :
Exar	nples: Boats, trailers, motors No Yes Make Model: Year:		who has an interest in the proone.  Debtor 1 only	torcycle accessori	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule aims Secured by Property
Exar	mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:		who has an interest in the proone.  Debtor 1 only Debtor 2 only	torcycle accessori	Do not deduct secured the amount of any secu Creditors Who Have Cla	rred claims on Schedule and sims Secured by Property  Current value of the
Exar	mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:		who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 2 only	torcycle accessori	Do not deduct secured the amount of any secu Creditors Who Have Cla	rred claims on Schedule nims Secured by Property Current value of the
Exar	mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:		who has an interest in the proone.  Debtor 1 only Debtor 2 only At least one of the debtors ar  Check if this is community	operty? Check  Indianother  Indianother	Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured	red claims on Schedule aims Secured by Property  Current value of the portion you own?  claims or exemptions. Po
Exar	Make Model: Other information:  Make Model: Make Model: Model: Make Model: Model: Model: Model: Model:		who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar instructions)  Who has an interest in the proone.	operty? Check  Indianother  Indianother	Do not deduct secured the amount of any secu Creditors Who Have Clas  Current value of the entire property?  Do not deduct secured the amount of any secu	red claims on Schedule aims Secured by Property  Current value of the portion you own?  claims or exemptions. Poured claims on Schedule
Exar	Make Model: Other information:  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year:		who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar instructions) Who has an interest in the pro	operty? Check  Indianother  Indianother	Do not deduct secured the amount of any secu Creditors Who Have Clas  Current value of the entire property?  Do not deduct secured the amount of any secu	red claims on Schedule aims Secured by Property  Current value of the portion you own?
Exar	Make Model: Other information:  Make Model: Make Model: Model: Make Model: Model: Model: Model: Model:		who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar instructions)  Who has an interest in the proone.	operty? Check  Indianother  Indianother	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	claims or exemptions. Polarims Secured by Property  Current value of the portion you own?  claims or exemptions. Polarims Secured by Property  Current value of the
Exar	Make Model: Other information:  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year:		who has an interest in the proone.  Debtor 1 only Debtor 2 only At least one of the debtors ar instructions)  Who has an interest in the proone.  Debtor 1 and Debtor 2 only  At least one of the debtors ar instructions)	operty? Check  Indianother  Indianother	Do not deduct secured the amount of any secu Creditors Who Have Classian Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classian Creditors Who Have Classian Creditors Cre	claims on Schedule sims Secured by Property  Current value of the portion you own?  claims or exemptions. Property sims Secured by Property
Exar	Make Model: Other information:  Make Model: Year: Approximate mileage:  Make Model: Year: Approximate mileage:		who has an interest in the proone. Debtor 1 and Debtor 2 only Debtor 1 and Debtors ar Check if this is community instructions)  Who has an interest in the proone. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 4 debtors ar Check if this is community instructions)  Who has an interest in the proone. Debtor 1 only Debtor 2 only	operty? Check  nd another  property (see	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	red claims on Schedule aims Secured by Property  Current value of the portion you own?  claims or exemptions. Property ared claims on Schedule aims Secured by Property  Current value of the
Exar	Make Model: Other information:  Make Model: Year: Approximate mileage:  Make Model: Year: Approximate mileage:		who has an interest in the proone. Debtor 1 and Debtor 2 only Debtor 3 and Debtor 3 ard Check if this is community instructions)  Who has an interest in the proone. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 3 ard Check if this is community instructions)  Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 2 only	operty? Check  nd another  property (see  operty? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	claims or exemptions. Polarims Secured by Property  Current value of the portion you own?  claims or exemptions. Polarims Secured by Property  Current value of the

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Debtor 1 Darche Turner Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... 3 beds \$500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music cell phone, 4 TVs, misc electronics Yes. Describe... \$1000.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Used clothing \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Misc iewelry \$25.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2475.00 for Part 3. Write that number here ......

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Debtor 1 Darche Turner Case number (if known) First Name Middle Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$100.00 17.1. Checking account: CitiBank 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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Debt	or 1 Darche		Turner	Case number (if known)	
	First Name	Middle Name	Last Name	. , ,	
20.	Negotiable instruments	orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfer assuer name:	checks, promissory not	es, and money orders.	
21.	Retirement or pension Examples: Interests in IF  No	RA, ERISA, Keogh, 401(k), 403(b)	-	, or other pension or profit-sharing plans	
	Yes. List each	Type of account:	Institution name:		
	account	401(k) or similar plan:			
	separately.	ror (ity or ommar plant			
		Pension plan:			
		IRA:			
			-		
		Retirement account:			
		Keogh:			
		Additional account:	-		
		Additional account:	-		
		deposits you have made so that with landlords, prepaid rent, public Electric:  Gas:  Heating oil:  Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:	_		
22	Annuities (A contract fo	or a periodic payment of money to	vou either for life or for	a number of years)	
23.	No Yes	Issuer name and description:	you, either for life or for	a number of years)	

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Debte	or 1 Darche	Turner	Case number (if known)	
0.4	First Name	Middle Name Last Name		
24.	26 U.S.C. §§ 530(b)(1), 529A(b), a	n an account in a qualified ABLE program, or un and 529(b)(1).	der a qualified state tuition program.	
	No Institution name an Yes	d description. Separately file the records of any inter-	ests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or future inter	ests in property (other than anything listed in lir	ne 1), and rights or powers	
	exercisable for your benefit		, ,	
	Yes. Describe			
26.		s, trade secrets, and other intellectual property , websites, proceeds from royalties and licensing ag		
	No Yes. Describe			
27.	Licenses, franchises, and other Examples: Building permits, exclus	general intangibles sive licenses, cooperative association holdings, liquo	or licenses, professional licenses	
	✓ No			
	Yes. Describe			
Mon	ney or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or property owed to you?  Tax refunds owed to you			portion you own? Do not deduct secured
				portion you own? Do not deduct secured
	Tax refunds owed to you  ✓ No  ☐ Yes. Give specific information		Federal:	portion you own? Do not deduct secured
	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whyou already filed the retur	nether ns	Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you  No Yes. Give specific information about them, including whyou already filed the return and the tax years	nether ns		portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you  No Yes. Give specific information about them, including whyou already filed the returnent that tax years	nether ns	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whyou already filed the return and the tax years  Family support  Examples: Past due or lump sum a	nether ns  limony, spousal support, child support, maintenanc	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  No Yes. Give specific information about them, including whyou already filed the returnent that tax years	nether ns  limony, spousal support, child support, maintenanc	State:  Local:  e, divorce settlement, property settlemen	portion you own?  Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whyou already filed the return and the tax years  Family support  Examples: Past due or lump sum a	nether ns  limony, spousal support, child support, maintenanc	State: Local: e, divorce settlement, property settlemen Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whyou already filed the return and the tax years  Family support  Examples: Past due or lump sum a	nether ns  limony, spousal support, child support, maintenanc	State: Local:  e, divorce settlement, property settlemen  Alimony:  Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whyou already filed the return and the tax years  Family support  Examples: Past due or lump sum a  ✓ No  Yes. Give specific information	nether ns 	State: Local:  Local:  Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whyou already filed the returnent that and the tax years  Family support  Examples: Past due or lump sum and No  Yes. Give specific information  Other amounts someone owes yeexamples: Unpaid wages, disability	nether ns 	State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whyou already filed the returnent that the tax years  Family support  Examples: Past due or lump sum at No  Yes. Give specific information  Other amounts someone owes year examples: Unpaid wages, disability Social Security benefits;	nether ns  limony, spousal support, child support, maintenanc  ou insurance payments, disability benefits, sick pay, va	State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whyou already filed the returnent that and the tax years  Family support  Examples: Past due or lump sum and No  Yes. Give specific information  Other amounts someone owes yeexamples: Unpaid wages, disability	nether ns  limony, spousal support, child support, maintenanc  ou insurance payments, disability benefits, sick pay, va	State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Darche		Turner	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance po Examples: Health, disability		th savings account (HSA); credit, h	omeowner's, or renter's insurance	
	Yes. Name the insuran of each policy and list		Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property			, or are currently entitled to receive	
	property because someone		roceeds from a life insurance policy	r, or are currently entitled to receive	
	Ves. Describe				
33.			ou have filed a lawsuit or made rance claims, or rights to sue	a demand for payment	
	✓ No Yes. Describe				
34.	Other contingent and un to set off claims	liquidated claims of e	every nature, including counterc	claims of the debtor and rights	
	✓ No  Yes. Describe				
35.	Any financial assets you	did not already list			
	Yes. Describe				
36.		•	Part 4, including any entries fo	. •	\$100.00
Part	_		_	nterest In. List any real estate in Part	l <u>.</u>
37.	No. Go to Part 6.	eyai vi equitable INT	erest in any business-related pro	Cu	rrent value of the
	Yes. Go to line 38.			Do	rtion you own? not deduct secured claims exemptions
38.	Accounts receivable or o	ommissions you alre	ady earned		
	Yes. Describe				
39.	Office equipment, furnish Examples: Business-related		modems, printers, copiers, fax ma	chines, rugs, telephones, desks, chairs, electro	nic devices
	No Yes. Describe				

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Deb	tor 1 Darche	Turner Case number (if known)	
	First Name	Middle Name Last Name	
40.	Machinery, fixtures, e	quipment, supplies you use in business, and tools of your trade	
	<b>✓</b> No		
	Yes. Describe		
	Tes. Describe		
11	Inventory		
41.	Inventory		
	<b>✓</b> No		
	Yes. Describe		
	Ш		
42.	Interests in partnersh	ips or joint ventures	
	<b>✓</b> No		
	✓ No	Name of entity: % of ownership:	
	Yes. Give specific	, or or or only	
	information about		<u> </u>
	them		
		<del></del>	<del>-</del> -
43.	Customer lists, mailing	lists, or other compilations	
	—		
	✓ No		
	Yes. Do your lists in	nclude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	□ No		
	□ No		
	Yes. Desc	ribe	
4.4	Any hysiness valeted		
44.	Any business-related	property you did not already list	
	<b>✓</b> No		
	Yes. Give specific		<del></del>
	information		
			<del></del> , _ <del></del> _
			<u> </u>
			<del></del>
45 A	dd the dellar value of a	all of your entries from Part 5, including any entries for pages you have attached	
		er here	
<b>&gt;</b>			
Part	Describe Any Fa	arm- and Commercial Fishing-Related Property You Own or Have an Interest In.	
	If you own or have an	interest in farmland, list it in Part 1.	
46.	Do vou own or have a	ny legal or equitable interest in any farm- or commercial fishing-related property?	
			Current value of the
	No. Go to Part 7.		portion you own?
	Yes. Go to line 47.		Do not deduct secured claims
	_ <del>_</del>		or exemptions
47.	Farm animals		
	Examples: Livestock, p	oultry, farm-raised fish	
	<b>√</b> No		
	Yes. Describe		
	-		

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Debt	or 1 Darche First Name		urner (	Case number (if known)	
48.	Crops-either growing of		ist ivallie		
	<b>I</b> ✓ No				
	Yes. Describe				
	_				
49.	Farm and fishing equip	ment, implements, machinery, fixture	s, and tools of trade		
	<b>√</b> No				
	Yes. Describe				
	_				
50.	Farm and fishing suppl	ies, chemicals, and feed			
	<b>✓</b> No				
	Yes. Describe				
51.	Any farm- and commen	rcial fishing-related property you did n	ot already list		
	<b>✓</b> No				
	Yes. Describe				
52. A	dd the dollar value of al	l of your entries from Part 6, including	anv entries for pages vol	u have attached	
		here			
				_	
Part 7	7: Describe All Pro	perty You Own or Have an Intere	st in That You Did Not	List Above	
53.		perty of any kind you did not already lists, country club membership	st?		
	No No	s, country dub membership			
	Yes. Give specific				
	information				
				,	
54. A	dd the dollar value of al	l of your entries from Part 7. Write tha	t number nere		
Part 8	List the Totals of	Each Part of this Form			
55 <b>C</b>	Part 1. Total real actato	, line 2			
33. F	ait I. Iotai leai estate	, IIIIC 2			
56. <b>p</b>	oart 2 total vehicles, line	e 5	\$7425.00		
57. <b>P</b>	art 3: Total personal an	d household items, line 15	\$2475.00		
58. <b>P</b>	art 4: Total financial as	sets, line 36	\$100.00		
59. <b>F</b>	Part 5: Total business-re	elated property, line 45			
60. <b>F</b>	Part 6: Total farm- and f	ishing-related property, line 52			
61. <b>F</b>	Part 7: Total other prope	erty not listed, line 54			
		Add lines 56 through 61	ф10000 00		. #10000 00
			\$10000.00	Copy personal property total	+ \$10000.00
					\$10000.00
63. <b>T</b>	otal of all property on S	chedule A/B. Add line 55 + line 62			

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Debtor 1	Darche		Turner	Case number (if known)	
	First Name	Middle Name	Last Name		

#### Schedule A/B: Property. Additional page

Part 3: Describe	Your Personal and Household Items				
Do you own or ha	Do you own or have any legal or equitable interest in any of the following items?				
6.2. Household goo	ds and furnishings				
No					
Yes. Describe	2 couches	\$150.00			
6.3. Household goo	ds and furnishings				
No					
Yes. Describe	dining set	\$200.00			
6.4. Household goo	ds and furnishings				
No					
Yes. Describe	misc furniture	\$100.00			

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Fill	in this inforr	mation to identify your case:					
Dek	otor 1	Darche First Name	Middle Name	Turner Last Nar	ne e		
	otor 2 ouse, if filing)	First Name	Middle Name	Last Nar	ne ne		
Uni	ted States B	ankruptcy Court for the: North	nern D	istrict of Illin			
	se number lown)			(318)			
Of	ficial I	Form 106C					Check if this is an amended filing
Sc	hedule	e C: The Property	/ You Claim a	s Exen	npt		04/16
For stat the tax- und you	each iten te a specif amount o exempt re ler a law t r exempti	f any applicable statutory etirement funds—may be	s exempt, you must s apt. Alternatively, you i limit. Some exempt unlimited in dollar a so a particular dollar e applicable statutor	specify the u may clai tions—suc nmount. Ho amount a	m the full fair market val h as those for health aid owever, if you claim an e	ue of the prop s, rights to rec exemption of 10	erty being exempted up to eive certain benefits, and
		of exemptions are you claim	•	en if vour so	ouse is filing with you		
		re claiming state and federal	•		ğ ,		
	You a	re claiming federal exemptio	ns. 11 U.S.C. § 522(b)(2	2)			
2.	For any p	operty you list on Schedule	A/B that you claim as e	xempt, fill i	n the information below.		
		ription of the property and hedule A/B that lists this	Current value of the portion you	Amount o	the exemption you claim	Specifi	ic laws that allow exemption
	property		own	Check only	one box for each exemption.		
			Copy the value from Schedule A/B				
	Brief description	:	\$100.00	<b>✓</b>	\$100.00		735 ILCS 5/12-1001(b)

No Yes

Checking account,

Honda Accord, 2009,

2009 Honda Accord

3. Are you claiming a homestead exemption of more than \$160,375?

CitiBank

Line from Schedule A/B:

description:

Line from Schedule A/B: 100% of fair market value, up to any

\$0

100% of fair market value, up to any

applicable statutory limit

applicable statutory limit

\$7,425.00

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

**V** 

735 ILCS 5/12-1001(c); 735 ILCS

5/12-1001(b)

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 Debtor 1
 Darche
 Turner
 Case number (if known)

 First Name
 Middle Name
 Last Name

Brief description of the property a line on Schedule A/B that lists the property		Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
	Copy the value from Schedule A/B		
Brief description: 3 beds Line from	\$500.00	\$500.00 100% of fair market value, up to any	735 ILCS 5/12-1001(b)
Schedule A/B: 06		applicable statutory limit	725 II CS 5/12 1001/b\
Brief description:  2 couches  Line from Schedule A/B: 06	\$150.00	\$150.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: dining set Line from Schedule A/B: 06	\$200.00	\$200.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: misc furniture Line from Schedule A/B: 06	\$100.00	\$100.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description:  cell phone, 4 TVs, misc electronics  Line from Schedule A/B: 07	\$1,000.00	\$1,000.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description:  Used clothing  Line from  Schedule A/B: 11	\$500.00	\$500.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Brief description:  Misc jewelry  Line from Schedule A/B: 12	\$25.00	\$25.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

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		Di	Jedinent 1 age 25 of	03		
Fill in thi	is information to identify your ca	se:				
Debtor 1	I Darche		Turner			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if		Middle Name	Last Name			
Liberta de C						
United S	States Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case nu	mber		· ·			
` '	cial Form 106D					Check if this is a amended filing
Sch	edule D: Credito	ors Who Ha	ve Claims Secur	ed by Prop	ertv	12/1
more spa	ace is needed, copy the Addition decase number (if known).	onal Page, fill it out, nu	le are filing together, both are eq mber the entries, and attach it to	•		
1. <b>Do</b>	any creditors have claims se					
			with your other schedules. You ha	ve nothing else to rep	ort on this form.	
<b>✓</b>	Yes. Fill in all of the information	n below.				
Part 1:	List All Secured Claims					
se in	ist all secured claims. If a credit eparately for each claim. If more th In Part 2. As much as possible, list ame.	nan one creditor has a pa	articular claim, list the other creditors	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	antander Consumer USA	Describe the propert	y that secures the claim:	\$12,737.00	\$7,425.00	\$5,312.00
1	reditor's Name 4101 MYFORD RD FL 2	2009 Honda Accord	,	7		
_	Number Street	_	e, the claim is: Check all that apply.	_		
_		Contingent				
_	USTIN         CA         92780           ity         State         ZIP Code	Unliquidated				
1	/ho owes the debt? Check one.	Disputed				
	Debtor 1 only	Nature of lien. Check	all that apply.			
	Debtor 2 only	An agreement you car loan)	made (such as mortgage or secured			
<u> </u>	Debtor 1 and Debtor 2 only	_ ′	h as tax lien, mechanic's lien)			
L	At least one of the debtors and another	Judgment lien from	m a lawsuit			
	Check if this claim relates	Other (including a	right to offset)			
	to a community debt late debt was 3/2015 curred	Last 4 digits of accord	unt number 1000			
	Add the dollar value of y	our entries in Column	A on this page. Write that number	\$12,737.00		

here:

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Fill in	this inforr	mation to identify your c	ase:					
Debto	r 1	Darche		Turner				
Debto	r 2	First Name	Middle Name	Last Name				
(Spouse	e, if filing)	First Name	Middle Name	Last Name				
United	States B	ankruptcy Court for the:	Northern	District of Illinois (State)				
Case I	number <sup>m)</sup>							
Offic	cial Fo	orm 106E/F			•	Che	ck if this is ar	amended filin
Scl	hedu	ıle E/F: Cre	editors Who	Have Unsecure	d Claims	;		12/1
other p Form 1 claims the en known	party to a look of the tries in the look of the look o	any executory contracts and on Schedule G: Exe listed in Schedule D: C he boxes on the left. At All of Your PRIORIT	s or unexpired leases th cutory Contracts and L Creditors Who Hold Clai		executory contract 3). Do not include a ce is needed, copy	s on <i>Schedu</i> any creditor the Part yo	lle A/B: Prop s with partia u need, fill i	perty (Official ally secured t out, number
2. L	Yes.  List all of isted, iden as much a Continuati	your priority unsecured tify what type of claim it as possible, list the claims on Page of Part 1. If mor	is. If a claim has both pri is in alphabetical order acc te than one creditor holds	s more than one priority unsecured clair ority and nonpriority amounts, list that or ording to the creditor's name. If you ha a particular claim, list the other creditor is for this form in the instruction bookle	claim here and show ave more than two p s in Part 3.	both priority	and nonprio	rity amounts.
						Total claim	Priority amount	Nonpriority amount
2.1	IDOR-Ba	ankruptcy Section		Last 4 digits of account number		\$0.00	\$0.00	\$0.00
	Chicago City Who inc Debt Debt At le Is the cl	Illinois State  Illinois State  urred the debt? Check tor 1 only tor 2 only tor 1 and Debtor 2 only ast one of the debtors ar ck if this claim relates aim subject to offset?	nd another	When was the debt incurred?  As of the date you file, the claim is apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim Domestic support obligations  Taxes and certain other debts yo government Claims for death or personal injurintoxicated Other. Specify	n: u owe the			
2.2	IRS 1 Priority C	reditor's Name		Last 4 digits of account number _		\$0.00	\$0.00	\$0.00
	PO Box Number	7346 Street		When was the debt incurred?	n/a			
	Philadelp City Who inc Debt Debt At le		Zip Code one. and another	As of the date you file, the claim is apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim Domestic support obligations  Taxes and certain other debts yo government Claims for death or personal injurintoxicated Other. Specify	n: u owe the ry while you were			

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Debtor 1 Darche Turner Case number (if known) First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **V** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Americash - Bankruptcy \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a Mkt Square Shop Ctr 180 S Bolingbrook Dr Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Bolingbrook 60440 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ payday loan Is the claim subject to offset? No Yes Asset Acceptance LLC \$35,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 2003 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Michigan 48090 Warren Disputed City State Zip Code Who incurred the debt? Check one Type of NONPRIORITY unsecured claim: Debtor 1 only  $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collecting for Navy Federal Credit Other. Specify Is the claim subject to offset? No Yes **CAINE & WEINER** \$300.00 Last 4 digits of account number 2267 Nonpriority Creditor's Name When was the debt incurred? 12/2017 21210 Erwin St Number Street As of the date you file, the claim is: Check all that apply. Contingent 91367 Woodland HIs California Unliquidated Zip Code City State Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: **✓** No PROGRESSIVE INSURANCE Other, Specify

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Debtor 1 Darche Turner Case number (if known)
First Name Middle Name Last Name

Part 2	Your NONPRIORITY Unsecured Claims - Continuation	Page	
	After listing any entries on this page, number them beginning wit	h 4.5, followed by 4.6, and so forth.	Total claim
4.4	CAINE & WEINER	Last 4 digits of account number 2267	\$300.00
	Nonpriority Creditor's Name 21210 Erwin St	When was the debt incurred? 12/2017	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Woodland Hls California 91367	Unliquidated	
	City State Zip Code  Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	브	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts  001 Collection; Collecting for	
	No	ORIGINAL CREDITOR:	
	Yes	Other. Specify PROGRESSIVE INSURANCE	
4.5	Chase Auto Finance		\$2,500.00
4.5	Nonpriority Creditor's Name	Last 4 digits of account number	\$2,300.00
	201 N. Central Ave.  Number Street	When was the debt incurred?n/a	
	Number	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Phoenix Arizona 85004	Unliquidated	
	City State Zip Code  Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	Other. Specify 2007 Volkswagen Passat	
	No		
	Yes		
4.6	CONVERGENT OUTSOURCING		\$733.00
4.0	Nonpriority Creditor's Name	Last 4 digits of account number 4125	Ψ133.00
	10750 HAMMERLY BLVD #200 Number Street	When was the debt incurred? 2/2017	
		As of the date you file, the claim is: Check all that apply.	
	Houston Texas 77043	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only	Disputed	
	<u>'</u>	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	001 Collection; Collecting for ORIGINAL CREDITOR:	
	✓ No	Other. Specify COMCAST	
	Yes		

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Debtor 1 Darche Turner \_\_\_ Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page Total claim After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Nonpriority Creditor's Name	125
Nonpriority Creditor's Name  10750 HAMMERLY BLVD #200 When was the debt incurred? 2/20	017
Number Street  As of the date you file, the claim is: Che	eck all that apply.
Contingent	
Houston Texas 77043 City State Zip Code Unliquidated	
City State Zip Code  Who incurred the debt? Check one.  Disputed	
Debtor 1 only  Type of NONPRIORITY unsecured claim	n:
Debtor 2 only  Student loans	
Debtor 1 and Debtor 2 only  Obligations arising out of a separation	agreement or
At least one of the debtors and another divorce that you did not report as prior	prity claims
Check if this claim relates to a community debt  Debts to pension or profit-sharing plant debts	ins, and other similar
Is the claim subject to offset?  On Collection; Collec	
No Other. Specify COMCAST	
Yes	
4.8 DEPT OF EDUCATION/NELN  Last 4 digits of account number 07	224 \$0.00
Nonpriority Creditor's Name 121 S 13TH ST  When was the debt incurred? 4/20	013
Number Street  As of the date you file, the claim is: Che	eck all that apply.
Contingent	oon an anat appry.
LINCOLN Nebraska 68508 Unliquidated	
City State Zip Code  Who incurred the debt? Check one.  Disputed	
Debtor 1 only  Type of NONPRIORITY unsecured claim	n:
☐ Debtor 2 only ✓ Student loans	
Debtor 1 and Debtor 2 only  Obligations arising out of a separation	agreement or
At least one of the debtors and another divorce that you did not report as prior	
Check if this claim relates to a community debt  Debts to pension or profit-sharing plant debts	ıns, and other similar
Is the claim subject to offset? Other. Specify	
✓ No	
Yes	
4.9 DEPT OF EDUCATION/NELN  Last 4 digits of account number 06	524 \$0.00
Nonpriority Creditor's Name	013
Number Street	
As of the date you file, the claim is: Che	еск ан тлат арріу.
LINCOLN Nebraska 68508 Unliquidated	
State Zip Gode	
Debtor 1 only	
Debtor 2 only	
Debter 1 and Debter 2 only	a agracom ent av
Obligations arising out of a separation divorce that you did not report as prior	
Check if this claim relates to a community debt  Debts to pension or profit-sharing planted debts	ns, and other similar
Is the claim subject to offset?  Other. Specify	
✓ No	
Yes	

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Debtor 1 Darche Turner Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** ENHANCED RECOVERY CO L 4.10 \$584.00 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 9/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** 32256 Florida Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? ✓ ORIGINAL CREDITOR: AT T **✓** No Other. Specify MOBILITY Yes 4.11 ENHANCED RECOVERY CO L \$584.00 1353 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 9/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32256 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: AT T **✓** No Other. Specify MOBILITY Yes 4.12 NAVY FEDERAL CR UNION \$0.00 Last 4 digits of account number 2573 Nonpriority Creditor's Name When was the debt incurred? 820 FOLLIN LANE 3/2008 Number As of the date you file, the claim is: Check all that apply. Contingent 22180 VIENNA Virginia Unliquidated City Zip Code State Disputed Who incurred the debt? Check one. Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset?

No Yes

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Debtor 1 Darche Turner Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 NAVY FEDERAL CR UNION \$0.00 Last 4 digits of account number 8469 Nonpriority Creditor's Name 820 FOLLIN LANE When was the debt incurred? 3/2008 Number Street As of the date you file, the claim is: Check all that apply. Contingent VIENNA 22180 Virginia Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes U S DEPT OF ED/GSL/ATL 4.14 \$8,091.00 1068 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 4/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ATLANTA** Georgia 30301 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.15 U S DEPT OF ED/GSL/ATL \$4,028.00 Last 4 digits of account number 4932 Nonpriority Creditor's Name When was the debt incurred? 4/2013 PO BOX 2287 Number As of the date you file, the claim is: Check all that apply. Contingent ATLANTA 30301 Georgia Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset?

No Yes

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Debtor 1 Darche Turner Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 U S DEPT OF ED/GSL/ATL \$8,091.00 - Last 4 digits of account number Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 4/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ATLANTA** 30301 Georgia Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes U S DEPT OF ED/GSL/ATL 4.17 \$4,028.00 Last 4 digits of account number 4932 Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 4/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ATLANTA** Georgia 30301 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_ Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Darche Turner Case number (if known)
First Name Middle Name Last Name

Add the Amounts for Each Type of Unsecured Claim

11136140	ividate valid			
Part 4: Add th	ne Amounts for Each Type of Unsecured Claim			
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for s	atistical reporting pur	poses only
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00	
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00	
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$24,238.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$41,234.00	
	6j. Total. Add lines 6f through 6i.	6j.	\$65,472.00	

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Debtor 1	Darche		Turner	
	First Name	Middle Name	Last Name	<u>.</u>
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois(State)	
Case number (If known)				

Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or comp	pany with whom you have	the contract or lease	State what the contract or lease is for
2.1	Banks, Mishinda Name 7210 s Champla			Residential Lease, Debtor is Lessee, Yearly Residential Lease
	Number	Street		
	Chicago	Illinois	60619	
	City	State	Zip Code	

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		DC	cument rage c	33 01 03
Fill in this infor	mation to identify your	case:		
Debtor 1	Darche		Turner	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States F	Bankruptcy Court for the	: Northern	District of Illinois	
Officed States E	sankrupicy Court for the	e. Northem	(State)	<del></del>
Case number				
(If known)				
				Check if this is an amended filing
Official	Form 106H			and the second s
Official	רטוווו וטטרו			
Schedul	e H: Your Co	debtors		12/15
				omplete and accurate as possible. If two married people are
the entries in t			-	ace is needed, copy the Additional Page, fill it out, and number of any Additional Pages, write your name and case number (if
1. Do you ha	ve any codebtors? (If	you are filing a joint case, do	not list either spouse as a co	odebtor.)
	• •	u lived in a community pro exico, Puerto Rico, Texas, W		Community property states and territories include Arizona, California,
✓ No.	Go to line 3.			
Yes.	Did your spouse, form	ner spouse, or legal equiva	lent live with you at the time	e?
	No			
	Yes. In which commu	nity state or territory did you	ı live?	Fill in the name and current address of that person.
	Name of your spouse	, former spouse, or legal equ	ivalent	<del>_</del>
	Number Street			<del></del>
	City	State	Zip Code	<del>_</del>
again as a	a codebtor only if that	person is a guarantor or o	osigner. Make sure you ha	our spouse is filing with you. List the person shown in line 2 we listed the creditor on Schedule D (Official Form 106D), ule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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		500	oamone	•	ago o .	0.00	
Fill in this info	rmation to identify	your case:					
Debtor 1	Darche		Turne				
	First Name	Middle Name	Last N			- Ch	eck if this is:
Debtor 2	<del>-</del>	N. C. I. II. N. I.				-   🗂	An amended filing
(Spouse, if filing)	First Name	Middle Name	Last N	lame			•
United States E the: Case number	Sankruptcy Court for	Northern	_ District of Illi (S	inois State)	1	-   "	A supplement showing post-petition chap expenses as of the following date:
(If known)						_	MM / DD / YYYY
Official F	orm 106I						
Schedul	e I: Your In	come					
number (if kno	e space is needed own). Answer ever cribe Employme	y question.	et to this for	m. (	On the top	of any addi	tional pages, write your name and c
Fill in your information			Debtor 1	l			Debtor 2
		Employment status	<b>✓</b> Emplo	oved			Employed
-	If you have more than one job, attach a separate page with information about additional employers.			Not Employed			Not Employed
		Occupation	Financial A				
•	clude part time, seasonal, or lf-employed work.  Employer's name  Employer's address  coupation may include student homemaker, if it applies.		Housing Authority of the County of Cook			ounty of Cook	
Occupation				175 W. Jackson, Suite 350  Number Street			Number Street
			Chicago City		Illinois State	60604 Zip Code	City State Zip Code
		How long employed there?	3 years 11	mor	nths		
Part 2: Give	e Details About N	Nonthly Income					
spouse unless If you or your i	you are separated. non-filing spouse have	e more than one employer,					write \$0 in the space. Include your non-fil or that person on the lines below. If you n
more space, a	attach a separate she	et to this form.			For D	Debtor 1	For Debtor 2 or non-filing spouse
		ary, and commissions (befo , calculate what the monthly		2.		\$3,262.42	
3. Estimate	and list monthly ove	rtime pay.		3.		+ \$0.00	
4. Calculate	gross income. Add l	ine 2 + line 3.		4.		\$3,262.42	

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ebtor 1 Darche Lu First Name Middle Name Las			Case number	(if	
FIIST NAME WILCIE N	ame Last Nam	<u> </u>	known) For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→	4.	\$3,262.42		
5. List all payroll deductions:					
5a. Tax, Medicare, and Social Security dedu	ctions	5a.	\$414.38		
5b. Mandatory contributions for retirement	plans	5b.	\$0.00		
5c. Voluntary contributions for retirement pl	ans	5c.	\$0.00		
5d. Required repayments of retirement fund	loans	5d.	\$0.00		
5e. <b>Insurance</b>		5e.	\$82.98		
5f. Domestic support obligations		5f.	\$0.00		
5g. Union dues		5g.	\$27.34		
5h. Other deductions. Specify:		5h. +	\$0.00 +		
6. Add the payroll deductions. Add lines 5a + 5b +5h.		6.	\$524.70		
7. Calculate total monthly take-home pay. Sub	tract line 6 from line 4.	7.	\$2,737.71		
8. List all other income regularly received:					
8a. Net income from rental property and from business, profession, or farm					
Attach a statement for each property and bu gross receipts, ordinary and necessary busin the total monthly net income.		8a.	\$0.00		
8b. Interest and dividends		8b.	\$0.00		
8c. Family support payments that you, a nor dependent regularly receive	-filing spouse, or a				
Include alimony, spousal support, child sup divorce settlement, and property settlement.		8c.	\$0.00		
8d. Unemployment compensation		8d.	\$0.00		
8e. Social Security		8e.	\$0.00		
8f. Other government assistance that you re Include cash assistance and the value (if kno cash assistance that you receive, such as for under the Supplemental Nutrition Assistance housing subsidies Specify:	own) of any non- od stamps (benefits	8f.	\$0.00		
8g. Pension or retirement income		8g.	\$0.00		
8h. Other monthly income. Specify:		8h. +	\$0.00 +		
9. Add all other income Add lines 8a + 8b + 8c +	8d + 8e + 8f +8g + 8h.	9.	\$0.00		
10. Calculate monthly income. Add line 7 + line 9 Add the entries in line 10 for Debtor 1 and Debt		10.	\$2,737.71 +		\$2,737.71
<ol> <li>State all other regular contributions to the Include contributions from an unmarried partne friends or relatives.</li> <li>Do not include any amounts already included in</li> </ol>	r, members of your househo	old, your	dependents, your roomm		
Specify:					11. + \$0.00
12. Add the amount in the last column of line 1 Write that amount on the Summary of Schedule					12. \$2,737.71  Combined monthly income
13. Do you expect an increase or decrease with No.	nin the year after you file t	this form	1?		
Yes. Explain:					

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		Doct	iment Page 36 of 6	9		
Fill in this infor	mation to identify your	case:				
Debtor 1	Darche		Turner			
	First Name	Middle Name	Last Name	Check if this is:		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filin	g	
United States E	Sankruptcy Court for the	e: Northern	District of Illinois (State)		owing post-petition c	hapter 13
Case number (If known)			(State)	MM / DD / YYYY		
Official	Form 106J					
Schedul	e J: Your Ex	penses				12/15
information. If (if known). Ans		l, attach another sheet to this	re filing together, both are equa form. On the top of any addition			∍r
1. Is this a join		<u> </u>				
	o to line 2					
	oes Debtor 2 live in a	separate household?				
г	No					
	Yes. Debtor 2 must	file Official Forms 106J-2, Exper	nses for Separate Household of Del	btor 2.		
2. Do you have	e dependents?	No				
Do not list D	· <u></u>	Yes. Fill out this information for	Dependent's relationship to	Dependent's	Does dependent li	ive
Debtor 2.	•	each dependent	Debtor 1 or Debtor 2	age	with you?	
			Child	13 years	No.	
					Yes.	
	enses include f people other	No				
than						
yourself and dependents	u youi	Yes				
исреписта	· ·					
Part 2: Estin	mate Your Ongoing	Monthly Expenses				
	of a date after the ban		ou are using this form as a suppopel plemental Schedule J, check th			
	•	-cash government assistance it on Schedule I: Your Income	-		Your ex	penses
	or home ownership or the ground or lot. 4.	expenses for your residence. In	nclude first mortgage payments and	d	4.	\$1,000.00
If not incl	uded in line 4:					
4a. Real es	state taxes				4a	\$0.00
4b. Proper	ty, homeowner's, or re	nter's insurance			4b.	\$0.00

4c.

4d.

\$0.00

\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Darche
 Turner
 Case number (if known)

 Last Name
 Last Name

5. Additional mortgage payments for your residence, such as home equity loans         5.         \$0.00           5. Utilities:         6a. Electricity, heat, natural gas         6a.         \$3500.00           6b. Waller, sewer, gurbage collection         6b.         \$0.00           6c. Telaphone, oil phone, Internet, satellite, and cable services         6c.         \$115.00           6d. Other, Soodby:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$310.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, Laundry, and dry cleaning         9.         \$130.00           10. Personal care products and services         10.         \$70.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation, include gas, maintanance, bus or train fure.         12.         \$150.00           Do not include or any payments         14.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Internamence.         15a         \$0.00           15. Life insurance         15a         \$0.00           15. Whice insurance deducted from your pay or included in lines 4 or 20.         15a         \$0.00           15. Whice insurance	First Name	Middle Name Last Name		
6. Ullities:         6.a.         \$350,00           6.b. Electricity, healt, natural gas         6.b.         \$30,00           6b. Wider, sewer, garbage collection         6c.         \$115,00           6b. Wider, sewer, garbage collection         6c.         \$115,00           6c. Unter, Specify;         6d.         \$10,00           7. Food and housekeeping supplies         8.         \$0,00           8. Childcare and children's education costs         8.         \$0,00           9. Clothing, laundry, and dry cleaning         9.         \$130,00           10. Personal care products and services         10.         \$70,00           11. Medical and cental expenses         11.         \$25,00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$150,00           Do not include car payments         13.         \$0,00           14. Charitable contributions and religious donations         13.         \$0,00           15. Insurance.         15a         \$0,00           15b. Health insurance         15a         \$0,00           15c. Vehicle insurance deducted from your pay or included in lines 4 or 20.         \$0,00           15c. Vehicle insurance         15a         \$0,00           15c. Vehicle insurance         15b				Your expenses
6a. Electricity, heat, natural gas         6a.         \$350.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, internet, stalliller, and cable services         6c.         \$115.00           6d. Other. Specify:         6d.         \$5.00           7. Food and housekeeping supplies         7.         \$310.00           8. Childcare and children's education costs         8.         \$0.00           9. Ctothing, laundry, and dry cleaning         9.         \$130.00           10. Personal care products and services         11.         \$25.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation, include gas, maintenance, bus or train fare.         12.         \$150.00           Do not include car payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Instantament, clubs, recreation, newspapers, magazines, and books         15.         \$0.00           15. Instantament, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           15. Instantament, clubs, recreation, newspapers, magazines, and books         15.         \$0.00           15. Instantament, clubs, recreation, personal clubs of the startage of the startage of the startage of the st	5. Additional mortgage paym	ents for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$115.00           6d. Other, Specity:         7.         \$310.00           7. Food and housekceping supplies         7.         \$310.00           8. Childcare and children's education costs         8.         \$0.00           9. Chithing, laundry, and dry cleaning         9.         \$130.00           10. Personal care products and services         10.         \$70.00           11. Medical and dental expenses         11.         \$255.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$150.00           10. not include any analysems.         13.         \$0.00           14. Charitable contributions and religious donations         13.         \$0.00           15. Insurance.         15.         \$0.00           15a. Life insurance educted from your pay or included in lines 4 or 20.         15a.         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance         15b         \$0.00           15c. Vehicle insurance         \$0.00         \$0.00           15c. Taxes Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00	6. Utilities:			
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other; Specify; 7. Food and housekeeping supplies 8. \$0.00 7. Food and housekeeping supplies 8. Childcare and children's education costs 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$130.00 10. Personal care products and services 11. \$25.00 11. Medical and dental expenses 11. \$25.00 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or Irain fare. 0 Do not include gas, maintenance, bus or Irain fare. 0 Do not include care payments 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15s. Life insurance 15s. Life insurance 15s. Life insurance 15s. Life insurance 15s. Uthic insurance specify: 15d. \$0.00 15c. Vehicle insurance specify: 15d. \$0.00 16c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15r. Installment or lease payments: 17s. Care payments for Vehicle 1 17s. Care payments for Vehicle 2 17to \$0.00 17c. Other. Specify: 17c. Other. Specify: 17d. \$0.00 17d. Other. Specify:	6a. Electricity, heat, natural g	gas	6a.	\$350.00
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7. Food and housekeeping supplies         7.         \$310.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$130.00           10. Personal care products and services         10.         \$770.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$150.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15a         \$0.00           15b. Health insurance deducted from your pay or included in lines 4 or 20.         15b         \$0.00           15c. Vehicle insurance.         15a         \$0.00           15c. Vehicle insurance.         15c         \$180.00           15c. Vehicle insurance. Specify:         15d         \$0.00           15c. Vehicle insurance. Specify:         15d         \$0.00           15c. Vehicle insurance. Specify:         15c         \$0.00           15c. Vehicle insurance. Specify:         15d         \$0.00           15c. Vehicle insurance. Specify:         15d         \$0.00     <	6c. Telephone, cell phone, I	nternet, satellite, and cable services	6c.	\$115.00
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9. Clothing, laundry, and dry cleaning       9. \$130.00         10. Personal care products and services       10. \$70.00         11. Medical and dental expenses       11. \$25.00         12. Transportation, Include gas, maintenance, bus or train fare.       12. \$150.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13. \$0.00         14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       15.         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance         15b. Health insurance       15b       \$0.00         15c. Vehicle insurance. Specify       15d       \$0.00         15c. Vehicle insurance. Specify       15d       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       15c       \$180.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       15c       \$0.00         17c. Car payments for Vehicle 1       17a       \$400.00         17c. Car payments for Vehicle 2       17b       \$0.00         17c. Other. Specify:       17c       \$0.00         17c. Other. Specify:       17c       \$0.00         17c. Other. Specify:       17c       \$0.00         17c. Other.	7. Food and housekeeping su	pplies	7.	\$310.00
10. Personal care products and services       10. \$70.00         11. Medical and dental expenses       11. \$25.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12. \$150.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13. \$0.00         14. Charitable contributions and religious donations       14. \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a. \$0.00         15a. Life insurance       15b. \$0.00       \$0.00         15b. Health insurance       15c. \$180.00         15c. Vehicle insurance       15c. \$180.00         15c. Vehicle insurance. Specify:       15c       \$180.00         16c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         \$pecify:       15c       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         \$pecify:       15c       \$0.00         17. Installment or lease payments:       17a       \$400.00         17b. Car payments for Vehicle 2       17b       \$0.00         17c. Other. Specify:       17c       \$0.00         17c. Other. Specify:       17c       \$0.00         17c. O	8. Childcare and children's e	ducation costs	8.	\$0.00
11. Medical and dental expenses       11.       \$25.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.       12.       \$150.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a.       \$0.00         15b. Health insurance       15c.       \$180.00       \$0.00 </td <td>9. Clothing, laundry, and dry</td> <td>cleaning</td> <td>9.</td> <td>\$130.00</td>	9. Clothing, laundry, and dry	cleaning	9.	\$130.00
12.   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments   12.   \$150.00     13.   Entertainment, clubs, recreation, newspapers, magazines, and books   13.   \$0.00     14.   Charitable contributions and religious donations   14.   \$0.00     15.   Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.     15a.   Life insurance   15a   \$0.00     15b.   Health insurance   15b   \$0.00     15c.   Vehicle insurance   15c   \$180.00     15c.   Vehicle insurance   15c   \$180.00     15c.   Vehicle insurance   15c   \$180.00     15d.   Other insurance. Specify:   15d   \$0.00     15d.   Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.     Specify:   15c   \$180.00     17.   Installment or lease payments:   16   \$0.00     17.   Installment or lease payments:   17a   \$400.00     17b.   Car payments for Vehicle 1   17a   \$400.00     17c.   Other.   Specify:   17c   \$0.00     17c.   Other.   Specify:   17c   \$0.00     18.   Your payments for laimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i).   18.     19.   Other payments you make to support others who do not live with you.   Specify:   19.   \$0.00     20.   Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   20a   \$0.00     20b.   Real estate taxes.   20b   \$0.00     20c.   Property, homeowner's, or renter's insurance   20c   \$0.00     20d.   Maintenance, repair, and upkeep expenses.   20d   \$0.00     20d.   Maintenance, repair, and upkeep expenses.   20d   \$0.00     20d.   Maintenance, repair, and upkeep expenses.   20d   \$0.00     20d.   20d.   Maintenance, repair, and upkeep expenses.   20d   \$0.00     20d.   20	10. Personal care products a	nd services	10.	\$70.00
Do not include car payments   13.   13.   13.   13.   13.   13.   13.   13.   13.   13.   14.   14.   15.   13.   14.   15.   15.   14.   15.	11. Medical and dental exper	nses	11.	\$25.00
14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       0 not include insurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance       15a \$0.00         15b. Health insurance       15b \$0.00         15c. Vehicle insurance       15c \$180.00         15c. Vehicle insurance. Specify:       15d \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       5pecify:         Specify:       16         17. Installment or lease payments:       17a \$400.00         17b. Car payments for Vehicle 1       17a \$400.00         17c. Other. Specify:       17c \$0.00         17c. Other. Specify:       17c \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       5pecify:       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a \$0.00         20b. Real estate taxes.       20b \$0.00         20c. Property, homeowner's, or renter's insurance       20c \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d \$0.00	-		12.	\$150.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance	13. Entertainment, clubs, rec	reation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance   15a   \$0.00 15b. Health insurance   15b   \$0.00 15c. Vehicle insurance   15c   \$180.00 15c. Vehicle insurance   15c   \$180.00 15d. Other insurance. Specify:   15d   \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:   16   \$0.00 17c. Installment or lease payments:   17a   \$400.00 17b. Car payments for Vehicle 1   17a   \$400.00 17c. Other. Specify:   17c   \$0.00 17d. Other. Specify:   17d   \$0.00 17d. Other. Specify:   17d   \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 108I).   18. 19. Other payments you make to support others who do not live with you. Specify:   19.   \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property   20a   \$0.00 20b. Real estate taxes.   20b   \$0.00 20c. Property, homeowner's, or renter's insurance   20c   \$0.00 20d. Maintenance, repair, and upkeep expenses.   20d   \$0.00 20d. Maintenance, repair, and upkeep expenses.	14. Charitable contributions	and religious donations	14.	\$0.00
15b		ducted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:	15c. Vehicle insurance		15c	\$180.00
Specify:	15d. Other insurance. Speci	fy:	15d	\$0.00
17.   Installment or lease payments:   17a. Car payments for Vehicle 1   17a   \$400.00   17b. Car payments for Vehicle 2   17b   \$0.00   17c. Other. Specify:   17c   \$0.00   17d. Other. Specify:   17d   \$0.00   17d. Other. Specify:   17d   \$0.00   18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   18.   19. Other payments you make to support others who do not live with you.   19.   \$0.00   20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   20a   \$0.00   20b. Real estate taxes.   20b   \$0.00   20b. Real estate taxes.   20c. Property, homeowner's, or renter's insurance   20d. \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   20	16. Taxes. Do not include taxes	s deducted from your pay or included in lines 4 or 20.		
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. So.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. 19. Other payments you make to support others who do not live with you.  Specify:  19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. So.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.	17. Installment or lease payn	nents:	10	
17c. Other. Specify:	17a. Car payments for Vehic	cle 1	17a	\$400.00
17d. Other. Specify:	17b. Car payments for Vehic	cle 2	17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20c. \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.			17d	\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20b. \$0.00  20c. Property, homeowner's, or renter's insurance  20c. \$0.00  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00				\$0.00
Specify:		,	18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20b. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00		e to support others who do not live with you.	40	
20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		see not included in lines 4 or 5 of this form or an Schodule I. Your Income	19.	\$0.00
20b. Real estate taxes.  20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00			202	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00				
20d. Maintenance, repair, and upkeep expenses.  20d \$0.00		s, or renter's insurance		
			20e	\$0.00

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Debtor 1	Darche	•		Turner	Case number (if known)			
	First Na	ame	Middle Name	Last Name				_
21. <b>Othe</b>	r. Spec	ify:				21		\$0.00
22. Calc	ulate y	our monthly expe	enses.					\$2,730.00
		es 4 through 21.						\$0.00
		, , ,	penses for Debtor 2), if any			_	\$2,730.00	
22c. /	Add line	e 22a and 22b. Th	e result is your monthly exp	enses.		22.		
23.Calcu	ılate y	our monthly net i	ncome.					
23a. (	Copy lii	ne 12 (your combi	ned monthly income) from	Schedule I.		23a		\$2,737.71
23b.	Сору у	our monthly exper	nses from line 22 above.			23b	_	\$2,730.00
23c. Subtract your monthly expenses from your monthly incor				ncome.				\$7.71
	The res	sult is your monthly	y net income.			23c		
24 Do v	nu exn	ect an increase o	or decrease in vour expen	ses within the year after y	ou file this form?			
-	•			-				
				oan within the year or do yo nodification to the terms of y				
		ayone to intorous			, our mongagor			
<b>✓</b> '	No							
	es .							
		Explain here:						
		Explain Holo.						
	l.							

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First Name Middle Name Last Name  Debtor 2
(Coorne (feliae)
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Northern District of Illinois (State)
Case number (If known)

Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	1: Sign Below						
	Did you pay or agree to pay someone who is NOT an attorney to h	elp you fill out bankruptcy forms?					
	<b>☑</b> No						
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and						
	that they are true and correct.						
x	/s/ Darche Turner	×					
	Signature of Debtor 1	Signature of Debtor 2					
	Date 3/27/2018	Date					
	MM/DD/YYYY	MM/DD/YYYY					

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Fill in th	his infor	mation to identify your c	ase:					
Debtor	1	Darche First Name	Middle N	Turner Jame Last Na	ame			
Debtor (Spouse,		First Name	Middle N	lame Last Na	ame			
United	States B	ankruptcy Court for the:	Northern	District of Illi				
Case n				(S	tate)			
Offic	cial	Form 107				<u> </u>		Check if this is a amended filing
		nt of Financia	l Affairs fo	or Individuals	Filing for	Bankru	ptcv	04/1
Be as o	complet ation. It	te and accurate as po f more space is neede own). Answer every qu	ssible. If two ma d, attach a sepa	arried people are filin	g together, both	are equally re	esponsible for s	
Part 1:	Give	<b>Details About Your</b>	Marital Status	and Where You Live	ed Before			
1. V	What is	your current marital sta	itus?					
[	_	ried married						
2. [	Ouring t	he last 3 years, have yo	u lived anywhere	other than where you	live now?			
[	✓ No Yes	. List all of the places yo	u lived in the last	3 years. Do not include	e where you live n	OW.		
	Deb	otor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
					Same as	Debtor 1		Same as Debtor 1
	Nun	nber Street		From	Number Stree	et		From
	City	State	Zip Code		City	State	Zip Code	
					Same as	Debtor 1		Same as Debtor 1
	Nun	nber Street		From	Number Stree	et		From To
	City	State	Zip Code		City	State	Zip Code	
	d territor No	e last 8 years, did you e ries include Arizona, Califo Make sure you fill out So	mia, Idaho, Louisi	iana, Nevada, New Mexid	co, Puerto Rico, Tex			mmunity property states

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ebtor 1 Darche First Name Midd	I urne Ile Name Last N		iumber (if known)	
art 2: Explain the Sources of Your Ir				
Did you have any income from employr Fill in the total amount of income you rece activities. If you are filing a joint case and y No Yes. Fill in the details.	nent or from operating a belived from all jobs and all bu	sinesses, including part-time	•	years?
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$6500.00	Wages, commissions, bonuses, tips Operating a business	
For last calendar year: (January 1 to December 31, 2017 )  YYYY	Wages, commissions, bonuses, tips Operating a business	\$39000.00	Wages, commissions, bonuses, tips Operating a business	
For the calendar year before that: (January 1 to December 31, 2016)  YYYY	Wages, commissions, bonuses, tips Operating a business	\$38000.00	Wages, commissions, bonuses, tips Operating a business	
Include income regardless of whether that public benefit payments; pensions; rental is filling a joint case and you have income that List each source and the gross income from No Yes. Fill in the details.	ncome; interest; dividends; it you received together, list	money collected from lawsuits; it only once under Debtor 1.	; royalties; and gambling and	
	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions an exclusions)
From January 1 of current year until the date you filed for bankruptcy:				
For last calendar year: (January 1 to December 31, 2017 )  YYYY				
For the calendar year before that: (January 1 to December 31, 2016 )  YYYY				

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Debtor 1 Darche Turner Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City Suppliers or State Zip Code vendors

Other

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or 1 Darche			Turr	ner	Case number	(if known)
First Name		Middle Name	Last	Name		
Insiders include you corporations of whi	ır relatives; a ch you are a e for a busin	ny general partners an officer, director, p ness you operate as	s; relatives of any goerson in control,	eneral partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? You are a general partner; It is securities; and any managing To domestic support obligations,
Yes. List all pa	ayments to a	an insider.				
_			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name						
Number Street						
City	State	Zip Code				
Insider's Name						
Number Street						
City	State	Zip Code				
insider? Include payments o	n debts gua		d by an insider.	Total amount paid	Amount you still owe	Reason for this payment  Include creditor's name
Insider's Name						
Number Street						
City	State	Zip Code				
Insider's Name						
Number Street						
	State	Zip Code				
City						

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Debtor 1 Darche Turner Case number (if known) First Name Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Circuit Court of Cook County, Illinois Court Name On appeal 5600 Old Orchard Road Case number NumberStreet Concluded 2013-M1-111970 Illinois 60077 Skokie City State Zip Code Case title Pending Circuit Court of Cook County, Illinois Court Name On appeal 5600 Old Orchard Road Case number NumberStreet Concluded 2013-M1-108365 Skokie Illinois 60077 City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Paycheck Garnished \$0 Asset Acceptance LLC Creditor's Name Explain what happened P.O. Box 2003 Number Street Property was repossessed. Property was foreclosed. Warren Michigan 48090 Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	or 1	Darche		Turner	Case number (if known	n)	
		First Name Middle Name		Last Name			
11.		thin 90 days before you filed for bankruptcy, counts or refuse to make a payment becaus			bank or financial institution,	set off any amou	ints from your
	<b>✓</b>	No Yes. Fill in the details.					
		, 1001 m. m. 000 000m.		Describe the action the	ne creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street					
				Last 4 digits of account	number: XXXX-		
		City State Zip Code					
12.		hin 1 year before you filed for bankruptcy, w pointed receiver, a custodian, or another off		y of your property in the	possession of an assignee f	or the benefit of o	creditors, a court-
	<b>✓</b>	No					
		Yes					
Part	5:	List Certain Gifts and Contributions					
13.	Wi	ithin 2 years before you filed for bankruptcy,	did y	ou give any gifts with a	total value of more than \$60	0 per person?	
	<b>✓</b>	No Yes. Fill in the details for each gift.					
		Gifts with a total value of more than \$600 per person		Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the Gift					
		Number Street					
		City State Zip Code					
		Person's relationship to you					
		Person to Whom You Gave the Gift					
		Number Street					
		City State Zip Code Person's relationship to you					

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Debt	tor 1	Darche		Turner	Case number (if know	vn)	
		First Name	Middle Name	Last Name			
14.	Wit	hin 2 years before you filed	for bankruptcy, did	you give any gifts or contrib	outions with a total value	of more than \$600	to any charity?
		No					
	$oldsymbol{\square}$						
		Yes. Fill in the details for ea	ch gift or contributio	on.			
		Gifts or contributions to ch	narities	Describe what you cont	ributed	Date you	Value
		that total more than \$600				contributed	
		Charity's Name					
		Number Street					
		City State	Zip Code				
		,					
Part	6.	List Certain Losses					
4-		it a contract of the			and the second second		. 11 P
15.		hin 1 year before you filed fo	or bankruptcy or sin	ce you filed for bankruptcy,	did you lose anything bed	cause of theπ, fire,	otner disaster, or
	gan	nbling?					
	<b>V</b>	No					
	H	Yes. Fill in the details.					
	Ш	res. Fill III the details.					
		Describe the property you	lost and	Describe any insurance	coverage for the loss	Date of your	Value of property
		how the loss occurred		Include the amount that i		loss	lost
				pending insurance claims	on line 33 of <i>Schedule</i>		
				A/B: Property.			
Part	-	List Certain Payments o	r Transfore				
	Wit	hin 1 year before you filed fo ut seeking bankruptcy or pr	or bankruptcy, did y eparing a bankrupt	cy petition?			anyone you consulted
	Wit	hin 1 year before you filed fo ut seeking bankruptcy or pr ude any attorneys, bankruptcy No	or bankruptcy, did y eparing a bankrupt	cy petition?			anyone you consulted
	Wit	hin 1 year before you filed fo ut seeking bankruptcy or pr ude any attorneys, bankruptcy	or bankruptcy, did y eparing a bankrupt	cy petition?			anyone you consulted
	Witi abo Incl	hin 1 year before you filed fo ut seeking bankruptcy or pr ude any attorneys, bankruptcy No	or bankruptcy, did y eparing a bankrupt	cy petition? credit counseling agencies fo	r services required in your b	ankruptcy.	
	Witi abo Incl	hin 1 year before you filed fo ut seeking bankruptcy or pr ude any attorneys, bankruptcy No	or bankruptcy, did y eparing a bankrupt	cy petition?	r services required in your b		Amount of
	Witi abo Incl	hin 1 year before you filed fo ut seeking bankruptcy or pr ude any attorneys, bankruptcy No	or bankruptcy, did y eparing a bankrupt	cy petition? credit counseling agencies for period of the counseling agencies agencies for period of the counseling agencies	r services required in your b	ankruptcy.  Date payment	
	Witi abo Incl	hin 1 year before you filed fout seeking bankruptcy or prude any attorneys, bankruptcy No Yes. Fill in the details.	or bankruptcy, did y eparing a bankrupt	cy petition? credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Witi abo Incl	hin 1 year before you filed fout seeking bankruptcy or prude any attorneys, bankruptcy No Yes. Fill in the details.  Semrad Law Firm	or bankruptcy, did y eparing a bankrupt	cy petition? credit counseling agencies for period of the counseling agencies agencies for period of the counseling agencies	r services required in your b	ankruptcy.  Date payment or transfer	Amount of
	Witi abo Incl	hin 1 year before you filed fout seeking bankruptcy or prude any attorneys, bankruptcy No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid	or bankruptcy, did y eparing a bankrupt	cy petition? credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Witi abo Incl	hin 1 year before you filed fout seeking bankruptcy or prude any attorneys, bankruptcy No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	or bankruptcy, did y eparing a bankrupt	cy petition? credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
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	Witi abo Incl	hin 1 year before you filed fout seeking bankruptcy or prude any attorneys, bankruptcy No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	or bankruptcy, did y eparing a bankrupt	cy petition? credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Witi abo Incl	hin 1 year before you filed fout seeking bankruptcy or prude any attorneys, bankruptcy No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street	or bankruptcy, did y eparing a bankrupt petition preparers, or	cy petition? credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Witi abo Incl	hin 1 year before you filed fout seeking bankruptcy or prude any attorneys, bankruptcy No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois	or bankruptcy, did y eparing a bankrupt petition preparers, or	cy petition? credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
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	Witi abo Incl	hin 1 year before you filed for the seeking bankruptcy or produce any attorneys, bankruptcy No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Paymone	per bankruptcy, did you be paring a bankrupt petition preparers, or petition preparers, petition p	cy petition? credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
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	Witi abo Incl	hin 1 year before you filed fout seeking bankruptcy or prude any attorneys, bankruptcy No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Paymore Person Who Was Paid  Number Street  City State	per bankruptcy, did you be paring a bankrupt petition preparers, or petition preparers, petition p	cy petition? credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment

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First Name  Middle Name  Last Name  Last Name  Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised thely you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No  Yes. Fill in the details.  Description and value of any property  transfer was made  Description and value of any property  transfer was made  Amount of payment or transfer was made  Amount of payment or transfer was made  Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.  Description and value of property  transferred  Describe any property or payments received or debts paid in exchange  Description and value of property transfer was made  Description and value of property transfer and the payments received or debts paid in exchange  Person Who Received Transfer  Number Street  City State Zip Code  Person's relationship to you  Person's relationship to you	Debto	or 1	Darche		Turner	Case	number <i>(if known)</i>			
Do not include any payment or transfer that you listed on line 16.    No   Yes, Fill in the details.   Description and value of any property transferred   Date payment or transfer was made			First Name	Middle Name	Last Name					
Person Who Was Paid  Number Street  City State Zip Code  8. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as socurity (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.  Description and value of property transferred in exchange  Person Who Received Transfer  Number Street  City State Zip Code  Person Who Received Transfer  Number Street  City State Zip Code  Person to relationship to you  Person who Received Transfer any property to a self-settled trust or similar device of which you are a beneficiar?  (These are often called asset-protection devices.)  No  Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made		help	you deal with your credit	ors or to make payn	nents to your creditors?	ur behalf <sub>l</sub>	pay or transfer	any property to	anyone	who promised to
Person Who Was Paid  Number Street  City State Zip Code  8. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as socurity (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.  Description and value of property transferred in exchange  Person Who Received Transfer  Number Street  City State Zip Code  Person Who Received Transfer  Number Street  City State Zip Code  Person to relationship to you  Person who Received Transfer any property to a self-settled trust or similar device of which you are a beneficiar?  (These are often called asset-protection devices.)  No  Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made		Į.	No							
Person Who Was Paid  Number Stroet    City   State   Zip Code		Ħ								
Person Who Was Paid  Number Street    City   State   Zip Code					Description and value of a	ny propert	у	Date	Amou	unt of payment
Person Who Was Paid    Number Street					transferred			• •		
Number Street    Number Street										
Number Street    Number Street			David Miles Miles David		_					
State   Zip Code			Person who was Paid							
Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?    Include both outlight transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.    No			Number Street							
Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?    Include both outlight transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.    No					-					
Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?    Include both outlight transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.    No			City State	Zin Code	-					
the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No Yes. Fill in the details.  Description and value of property transfer and transfers that you have already listed on this statement.  Description and value of property transfer and payments received or debts paid in exchange  Date transfer was made  Date transfer was made  Diving State Zip Code Person's relationship to you  Person's relationship to you  Person's relationship to you  This state Zip Code Person's relationship to you  Description and value of the property transfer transfer and property to a self-settled trust or similar device of which you are a beneficiary?  These are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made			Oity Otato	2.10 0000						
Description and value of property transferred    Describe any property or payments received or debts paid in exchange		and	transfers that you have alrea			security in	terest or mortga	ge on your proper	ty). Do r	not include gifts
Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  Person's relationship to you  Person's relationship to you  19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?  (These are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made			Yes. Fill in the details.							
Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  Person's relationship to you  9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?  (These are often called asset-protection devices.)  No  Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made						roperty				
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Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made										
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Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made			Number Street		-					
Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made					-					
Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made			City State	Zip Code	-					
Number Street  City State Zip Code Person's relationship to you  9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Date transfer was made			-	•						
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City State Zip Code Person's relationship to you  9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made			Person Who Received Trans	sfer	_					
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9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?  (These are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made					_					
9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?  (These are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made			City State	Zin Code	-					
beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made			•							
beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made										
(These are often called asset-protection devices.)  ✓ No  ✓ Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made				ed for bankruptcy, di	d you transfer any property to a	self-settl	ed trust or sim	ilar device of wh	ich you	are a
Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made				tection devices.)						
Yes. Fill in the details.  Description and value of the property transferred  Date transfer was made				•						
Description and value of the property transferred  Date transfer was made										
transfer was made		Ш	. So. i iii ii i u io dotalio.		Description and value of t	the proper	tv transferred			Date
					2000 phon and raide of t	o proper	-, transierreu			transfer was
Name of trust										made
			Name of trust							

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Debtor 1 Darche Turner Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code City State Zip Code

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Debtor 1 Darche Turner Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code

City

State

Zip Code

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Deb		Darche			Turner	Cas	se number <i>(ii</i>	f known)	
		First Name		Middle Name	Last Name				
26.	Hav	e you been a part	/ in any judici	al or administr	rative proceeding und	ler any environmer	ntal law? In	nclude settlements and or	ders.
		No Yes. Fill in the det	ails.						
					Court or agency		Nature	of the case	Status of the case
		Case title			Court Name				Pending
		Case number			NumberStreet				On appeal
		_			City State	Zip Code			Concluded
Pari	t 11:	Give Details Ab	oout Your B	usiness or Co	onnections to Any E	Business			
27.	Witl	nin 4 years before	you filed for b	ankruptcy, did	d you own a business	or have any of the	following c	connections to any busines	ss?
		A member of A partner in a An officer, di	a limited liab a partnership rector, or mar	lity company (L	ade, profession, or oth LC) or limited liability ve of a corporation	partnership (LLP)	full-time or p	part-time	
		An owner of	at least 5% of	the voting or e	equity securities of a co	orporation			
	<b>✓</b>	No. None of the a							
		Yes. Check all that	at apply abov	e and fill in the	details below for each				
					Describe the na	ature of the busine	ess	Employer Identification include Social Security	
		Business Name			_			EIN:	
		Number Street			Name of accou	ntant or bookkeep	per	Dates business existed	
		City	State	Zip Code				From To	
					Describe the na	ature of the busine	ess	Employer Identification include Social Security	
		Business Name			_			EIN:	
		Number Street			Name of accou	ntant or bookkeep	per	Dates business existed	
		City	State	Zip Code	_			From To	
					Describe the na	ature of the busine	ess	Employer Identification include Social Security	
		Business Name			_			EIN:	
		Number Street			Name of accou	ntant or bookkeep	per	Dates business existed	
		City	State	Zip Code	_			From To	

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## Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.    No	Deb	tor 1 Darche			Turner	Case number (if known)
reditors, or other parties.  No Yes. Fill in the details below.    Name		First Nar	ne	Middle Name	Last Name	
Name   Number Street	28.	creditors,	or other parties.		ı give a financial statement	to anyone about your business? Include all financial institutions,
Number Street  City State Zip Code  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   **  /s/ Darche Tumer  Signature of Debtor 1  Date  Date  Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No  Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?					Date issued	
Number Street  City State Zip Code  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   **  /s/ Darche Tumer  Signature of Debtor 1  Date  Date  Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No  Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?						
City State Zip Code  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.		Name			MM/DD/YYYY	
City State Zip Code  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.		Numb	or Stroot			
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true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.     X	Par	t 12: Sign	Below			
Signature of Debtor 1  Date 3/27/2018  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	1	true and cor	rect. I understand th y case can result in f	at making a false stat ines up to \$250,000, o	ement, concea <sup>l</sup> ing property r imprisonment for up to 20	, or obtaining money or property by fraud in connection with years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
Date 3/27/2018  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?			/s/ Darche Tu			· · · <u></u>
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  No			Signature of Debi	or i		<u> </u>
✓ No			Date 3/27/2018			Date
		No Yes  Did you pay				
Declaration, and Signature (Official Form 119)			ne of person			

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Fill in this information to identify your case:				
Debtor 1	Darche		Turner	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)			(2)	

Check if this is an amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

	For any creditors that you listed in Part 1 of Schedule D: Creditors V information below.	Vho Have Claims Secured by Property (Official Forr	n 106D), fill in the
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
	Creditor's name: Santander Consumer USA  Description of property securing debt: 2009 Honda Accord	Surrender the property.  ☐ Retain the property and redeem it.  ☐ Retain the property and enter into a Reaffirmation Agreement.  ☐ Retain the property and [explain]:	No. ✓ Yes.
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.

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List Your Unexpired	Personal Property Leas	ses	
nation below. Do not list r		d leases are leases that	Contracts and Unexpired Leases (Official Form 106G), fill in thate still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
escribe your unexpired po	ersonal property leases		Will the lease be assumed?
essor's name:			□ No □ Yes
escription of leased roperty:			<b>_</b>
essor's name:			□ No □ Yes
escription of leased roperty:			<del>_</del>
essor's name:			□ No □ Yes
escription of leased operty:			<b>_</b>
essor's name:			□ No □ Yes
escription of leased roperty:			<del>_</del>
essor's name:			□ No □ Yes
escription of leased roperty:			<u>—</u>
essor's name:			□ No □ Yes
escription of leased roperty:			_
essor's name:			□ No □ Yes
escription of leased roperty:			<b>_</b>
		my intention about any	property of my estate that secures a debt and any personal
perty that is subject to a	n unexpired lease.	*	
/s/ Darche Turner Signature of Debtor 1		_	nature of Debtor 2

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B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

		Northern Distric	ct of Illinois	
n re	Darche Turner		Case No.	
	Debtor		Observation	(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSATIO	N OF ATTORNEY F	OR DEBTOR
co	mpensation paid to me within on	e year before the filing of the	fy that I am the attorney for the abo oetition in bankruptcy, or agreed to ation of or in connection w ith the	be paid to me, for services
Fo	or legal services, I have agreed to a	accept		\$1,750.00
Pr	ior to the filing of this statement	have received		\$0.00
Ва	alance Due			\$1,750.00
2. Th	e source of the compensation pa	id to me was:		
	<b>Debtor</b>	Other (specify)		
3. Th	e source of the compensation pa	id to me is:		
	<b>✓</b> Debtor	Other (specify)		
4.	I have not agreed to share the a members and associates of my		n with any other person unless the	y are
		aw firm. A copy of the agreeme	th a other person or persons who a ent, together with a list of the name	
5. ln	return for the above-disclosed fe	e, I have agreed to render lega	I service for all aspects of the bank	ruptcy case, including:
	<ul> <li>a. Analysis of the debtor's final bankruptcy;</li> </ul>	ncial situation, and rendering	advice to the debtor in determining	g whether to file a petition in
	b. Preparation and filing of any	petition, schedules, statemer	nts of affairs and plan which may b	pe required;
	c. Representation of the debto	or at the meeting of creditors a	nd confirmation hearing, and any a	adjourned hearings thereof;
6. By	agreement with the debtor(s), the	e above-disclosed fee does no	ot include the following services:	
		CERTIFIC	ATION	
	tify that the foregoing is a compl s) in this bankruptcy proceedings		nt or arrangement for payment to n	ne for representation of the
	3/27/2018		/s/ Stephen Cramarosso	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### UNITED STATES BANKRUPTCY COURT

**Northern District of Illinois** 

In re:	Turner, Darche	Case No.	Case No.		
Debtor(s)					
		Chapter.	Chapter7		
	VERIF	ICATION OF CREDITOR MAT	RIX		
Th knowledge		rify that the attached list of creditors is tru	ue and correct to the best of their		
Date:	3/27/2018	/s/ Turner, Darche	е		
		Turner, Darche Signature of Debi	tor		

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA, GA, 30301

CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

CAINE & WEINER 21210 Erwin St Woodland Hls, CA, 91367

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN, NE, 68508

NAVY FEDERAL CR UNION PO Box 3000 Merrifield, VA, 22119

Asset Acceptance LLC PO Box 2036 Warren, MI, 48090

IRS 1 PO Box 7346 Philadelphia, PA, 19101

IDOR-Bankruptcy Section Po Box 851388 Minneapolis, MN, 55485

Americash - Bankruptcy 880 Lee Street Suite 302 Des Plaines, IL, 60016 Case 18-08808 Doc 1 Filed 03/27/18 Entered 03/27/18 12:01:51 Desc Main Document Page 61 of 69

Chase Auto Finance PO Box 15298 Wilmington, DE, 19850

### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1750.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00 Motion to Reopen \$350.00 + court costs

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 3/27/2018

Client La

Client

Attorney

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### UNITED STATES BANKRUPTCY COURT Northern District of Illinois

In re:	Turner, Darche  Debtor(s)	Case No	
		Chapter.	Chapter7
	VERIFICATI	ON OF CREDITOR MATRIX	, `
Ti knowledge	he above named Debtors hereby verify that te.	he attached list of creditors is true an	nd correct to the best of their
Date:	3/27/2018	/s/ Turner, Darche Turner, Darche Signature of Debtor	Jurelie Sun

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Debtor	Darche		Turner	Case number (if
1	First Name	Middle Name	Last Name	known)
Part 2:	List Your Unexp	ired Personal Property Leases		
informa	ition below. Do not	Il property lease that you listed in S list real estate leases. Unexpired le onal property lease if the trustee do	ases are leases th	ory Contracts and Unexpired Leases (Official Form 106G), fill in the nat are still in effect; the lease period has not yet ended. You may 11 U.S.C. § 365(p)(2).
Des	scribe your unexpire	ed personal property leases		Will the lease be assumed?
Les	ssor's name:			□ No □ Yes
	scription of leased perty:			<u> </u>
Les	ssor's name:			☐ No ☐ Yes
	scription of leased perty:			_
Les	sor's name:			□ No □ Yes
	scription of leased perty:			
Les	ssor's name:			□ No □ Yes
	scription of leased perty:			<b>—</b>
Les	sor's name:			☐ No ☐ Yes
	scription of leased perty:			
Les	sor's name:			☐ No ☐ Yes
	scription of leased perty:			_
Les	sor's name:			☐ No ☐ Yes
	scription of leased perty:			_
Part 3:	Sign Below	under et der den delkelde betre deue der tree de tree de version de de version de de version de version de des	*	
Unde prop	er penalty of perjury erty that is subject	r, I declare that I have indicated my to an unexpired lease.	intention about a	ny property of my estate that secures a debt and any personal
	/s/ Darche Turner	Parche Seme	× ×	Signature of Debtor 2
D	ate 3/27/2018 MM/DD/YYYY			Date MM/DD/YYYY

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Debto	r 1 Darche First Name Middle Nam	Turner e Last Name	Case number (if known)
y	Middle Name	e Last Name	
28. \	creditors, or other parties.	cy, did you give a financial staten	nent to anyone about your business? Include all financial institutions,
	✓ No  Yes. Fill in the details below.		
		Date issued	
	Name	MM/DD/YYYY	_
	Number Street		
	City State Zip C	Code	
Part 1	2: Sign Below		
trı	ie and correct. I understand that making a	false statement, concealing prop	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with 0 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	/s/ Darche Turner Signature of Debtor 1	relio Serna	Signature of Debtor 2
	Signature of Debtor 1		
	Date 3/27/2018		Date
Die	d you attach additional pages to Your State	ement of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
V	No		
	Yes		
Die	d you pay or agree to pay someone who is i	not an attorney to help you fill ou	t bankruptcy forms?
7	No		
Г	Yes. Name of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 2 Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: Northern District of Illinoi (State)  Case number	Debtor 1	Darche		Turner	
United States Bankruptcy Court for the: Northern District of Illinoi (State)  Case number	Debtor 2	First Name	Middle Name	Last Name	
Case number (State	(Spouse, if filing)	First Name	Middle Name	Last Name	
Case number	United States I	Bankruptcy Court for the:	Northern	District of Illinois (State)	
	Case number (If known)				

Check if this is an amended filing

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Part 1: Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to I	help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and
/s/ Darche Turner Signature of Debtor 1	Signature of Debtor 2
Date 3/27/2018 MM/DD/YYYY	Date MM/DD/YYYY

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Debtor 1 Darche First Name	Turn		nber (if known)			
12	Middle Name Last I	Name				
16. What kind of debts do you have?	16a. Are your debts primarily co "incurred by an individual pri  No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily bu money for a business or inve  No. Go to line 16c.  Yes. Go to line 17.	Yes. Go to line 17.  b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.				
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	estimate that any exempt the expenses are paid that will be available ribution to  Yes. I am filing under Chapter 7. Go to line 16.  Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  No.  Yes.					
18. How many creditors do you estimate that you owe?	<ul><li>✓ 1-49</li><li>✓ 50-99</li><li>✓ 100-199</li><li>✓ 200-999</li></ul>	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,00 More than 100	00		
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 milli \$10,000,001-\$50 mi \$50,000,001-\$100 n \$100,000,001-\$500	llion	11-\$10 billion 101-\$50 billion		
20. How much do you estimate your liabilities to be?  Part 7: Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 milli \$10,000,001-\$50 mi \$50,000,001-\$100 n \$100,000,001-\$500	llion	01-\$10 billion 001-\$50 billion		
	I have examined this petition, and	I declare under penalty of pe	rium that the information provide	ded is true and		
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true ar correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, of title 11, United States Code. I understand the relief available under each chapter, and I choose to proced under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fout this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in					
	connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 151	e can result in fines up to \$2 19, and 3571.	50,000, or imprisonment for up			
	Signature of Debtor 1  Executed on 3/27/2018  MM / DD / Y	E	Executed onMM / DD / YYYY	Y		

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Debtor 1	Darche		Turner	Case number (if k	known)	
	First Name	Middle Name	Last Name	Secretarian de la constantina del constantina de la constantina de la constantina del constantina de la constantina de la constantina del constantina	,	
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
Do no	ployment compe of enter the amoun the Social Security	nsation t if you contend that the amou Act. Instead, list it here:	unt received was a bene	\$0.00 efit		
For yo	ou		\$0.00			
For yo	our spouse		\$0.00			
benef	it under the Social			as a \$ <u>0.00</u>		
amou paym intern	nt. Do not include ents received as a v	sources not listed above. S any benefits received under the victim of a war crime, a crime is terrorism. If necessary, list of elow.	ne Social Security Act or against humanity, or			
Total	amounts from sep	arate pages, if any.		+\$0.00	+	
11. Calc	culate your total	current monthly income. Ac	d lines 2 through 10 fo	or \$3,243.67	+	= \$3,243.67
	umn. Then add the	total for Column A to the total	al for Column B.			
						Total current
Part 2:	Determine Wh	ether the Means Test Ap	onlies to You			monthly income
e pokula a		t monthly income for the ye	The second secon			
		rent monthly income from line			py line 11 here →	\$3 242 67
	Multiply by 12 (the	number of months in a year).		and the time and the same time the time the temperature state of the same state of t	F)	\$3,243.67
		nnual income for this part of t			105	X 12
120.	The result is your a	middi income for this part of t	ne ionii.		12b.	\$38,924.04
13 Calcu	late the median	family income that applies	to you. Follow these st	eps:		
			Illinois			
Fill in	the state in which	you live.				
Fill in	the number of peo	ple in your household.	2			
Fill in house	the median family i ehold.	income for your state and size	of		13.	\$67,254.00
instru	ctions for this form	e median income amounts, g . This list may also be availabl	o online using the link s e at the bankruptcy cler	specified in the separate rk's office.		
14. How	do the lines com	pare?				
14a.	✓ Line 12b is less Go to Part 3.	s than or equal to line 13. On	the top of page 1, chec	ck box 1, There is no presumption	of abuse.	
14b.	Line 12b is mo Go to Part 3 ar	ore than line 13. On the top of and fill out Form 122A-2.	page 1, check box 2,	The presumption of abuse is deter	mined by Form 122A-2.	
Part 3:	Sign Below					
By s	igning here, I decla	re under penalty of perjury tha	at the information on th	is statement and in any attachmen	its is true and correct.	
_	/s/ Darche Turne	1000	Sen	Signature of Debtor 2		_
C	Date 3/27/2018 MM/DD/YYY	7		Date 3/27/2018 MM/DD/YYYY		
		4a, do NOT fill out or file Form 4b, fill out Form 122A-2 and				